Saskatchewan Ministry of Health

Drug Plan and Extended Benefits Branch

December 2009
Bulletin #121
ISSN 1923-077X

SASKATCHEWAN FORMULARY BULLETIN
UPDATE TO THE
59th EDITION OF THE
SASKATCHEWAN FORMULARY

NEW FULL FORMULARY LISTINGS EFFECTIVE DECEMBER 1, 2009:

- Bimatoprost, ophthalmic solution, 0.01% (Lumigan-ALL)

NEW EXCEPTION DRUG STATUS LISTINGS EFFECTIVE DECEMBER 1, 2009:

- Calcium acetate, tablet, 667mg (PhosLo-FMC)

For treatment of:
a) End-stage renal disease in patients intolerant to aluminum or calcium containing phosphate-binding agents.
b) End-stage renal disease in patients where aluminum or calcium containing phosphate-binding agents are inappropriate.

- Interferon Beta-1A, pre-filled cartridge, 66mcg/1.5mL, (3 doses of 22 mcg), 132mcg/1.5mL (3 doses of 44mcg) (Rebif-SRO)

For coverage according to the current criteria for interferon Beta-1A.

- Trospium chloride, tablet, 20mg (Trosec-ORX)

For treatment of patients intolerant to oxybutynin chloride.

REVISED EXCEPTION DRUG STATUS CRITERIA EFFECTIVE DECEMBER 1, 2009:

- Tenofovir disoproxil fumarate, tablet, 300mg (Viread-GSK)

For treatment of:
a) HIV in patients who have failed an alternative nucleoside reverse transcriptase inhibitor.
b) HIV in patients intolerant to an alternative nucleoside reverse transcriptase inhibitor.
This drug, as with other antivirals in the treatment of HIV, should be used under the direction of an infectious disease specialist.
c) Chronic hepatitis B infection in patients with cirrhosis documented on radiologic or histologic grounds and a HBV DNA concentration above 2000 IU/mL.

NEW INTERCHANGEABLE FULL FORMULARY OR EDS LISTINGS EFFECTIVE NOVEMBER 1, 2009:

- Azithromycin, oral suspension, 20mg/mL, 40mg/mL (Sandoz Azithromycin-SDZ)
- Fentanyl, transdermal system, 12mcg/hr, 25mcg/hr, 50mcg/hr, 75mcg/hr, 100mcg/hr (Ran-Fentanyl Matrix-RAN)
- Nifedipine, extended release tablet, 60mg (Mylan-Nifedipine XL-MYL)
- Olanzapine, orally disintegrating tablet, 5mg, 10mg, 15mg (Novo-Olanzapine OD-NOP) (pms-Olanzapine ODT-PMS)
- Olanzapine, tablet, 2.5mg. 5mg, 7.5mg, 10mg, 15mg (Novo-Olanzapine-NOP) (pms-Olanzapine-PMS)
- Quetiapine, tablet, 25mg, 100mg, 200mg, 300mg (Jamp-Quetiapine-JPC)
- Salbutamol sulfate, metered dose inhaler, 100 mcg/dose (Ventolin HFA-GSK)
- Simvastatin, tablet, 5mg, 10mg, 20mg, 40mg, 80mg (Jamp-Simvastatin-JPC)

DRUGS REVIEWED AND NOT RECOMMENDED

The Committee supports the CEDAC recommendation that the following products not be listed:

- Teriparatide (rDNA origin), pre-filled pen, 250mcg/mL (Forteo-LIL)
- Levodopa/carbidopa, intestinal gel, 20mg/mL/5mg/mL (Duodopa-SLV)

RECOMMENDED FOR DELISTING EFFECTIVE DECEMBER 1, 2009:

- Flavoxate HCl, tablet, 200mg (Apo-Flavoxate-APX)

The Saskatchewan Formulary Committee (SFC) have recommended that Apo-Flavoxate 200mg be delisted from the Formulary due to the high cost of this drug relative to other listed alternatives and insufficient evidence to support continued listing of this product. For those patients currently taking the drug, coverage will continue i.e. they will be GRANDFATHERED.

FROM THE ADVISORY COMMITTEE ON INSTITUTIONAL PHARMACY PRACTICE (ACIPP):

- Fondaparinux sodium, injection, 2.5mg/0.5mL, 7.5mg/0.6mL (Arixtra-GSK)

For the treatment of heparin-induced thrombocytopenia (HITT).

Note: the brand name will not appear in the HBDL as only generic names are published in this list.

Saskatchewan Ministry of Health
Drug Plan and Extended Benefits Branch
2nd Floor, 3475 Albert Street
Regina, Saskatchewan S4S 6X6
(306) 787-3317
1-800-667-7581

This Bulletin is not to be reproduced or republished except with the approval of the Saskatchewan Ministry of Health. Inquiries should be directed to the address or telephone numbers shown at left.